

# HEALTH PROMOTION & PREVENTION INITIATIVES

## NEWSLETTER

Issue No. 15



November-December 2005

### Initiative Spotlight



#### Beneficiary Walking Program



#### The health issue

The goal of this initiative was to improve health habits among the civilian employee and beneficiary population. This program is particularly relevant during this time of increased stress due to deployments.

#### Unique and/or innovative program aspects

Small steps which demonstrate measurable results will encourage continued lifestyle change. Each week, participants were encouraged to take 2000 more steps to a goal of 10,000 steps. An email group was established to provide a forum to exchange information and publicize upcoming events. "Lunch and learn" sessions were presented on various health topics. Maps outlining walking routes around the hospital and within the family housing areas are provided. During the 12-week program, fitness logs were reviewed weekly and physical assessments conducted every three weeks. The most encouraging support has come from within the group as they exchanged ideas, formed walking groups and provided a source of encouragement for each other.

#### Demonstration of program effectiveness or impact

Of 50 original participants, 44 completed the program with 65% reporting decreased weight and decreased inches. In addition, more than 90% of participants reported increased energy at the end of the program while 61% reported decreased stress.

#### Impact on force readiness and deployability

Implementation of this program will result in a healthier, more productive workforce and community. A walking program helps foster esprit de corps and increases connectivity and contact among those left behind during deployments. In addition, increased physical activity and a healthier lifestyle among family members will help support the Soldier as he or she prepares to deploy or returns home.

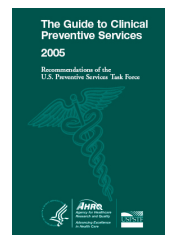
### Ideas from the Field

#### Advice from HPPI FY04 project POCs (part 5)

- Get feedback from Commanders. What do they need? What do they want?
- Submit quarterly program results to the Performance Improvement or other Quality Management-type Board at your installation which prepares reports for Command.
- Get buy-in from other MTF staff when your program may overlap part of their lane. Reassure them that you are not out to "take their business."
- Because the Army population is so mobile, you must market your program all the time.
- Determine where staff resources can make the most impact. Shift resources as needed.

### Prevention Resources

The Guide to Clinical Preventive Services includes U.S. Preventive Services Task Force (USPSTF) recommendations on screening, counseling, and preventive medicine topics. Clinical considerations for each topic are also included. <http://www.ahrq.gov/clinic/pocketgd.htm>



## Program Pointers

### What data can be used to show program impact?

There are many ways to measure program impact. Use **pre- and post-tests** to measure changes in:

- Levels of physical activity, stress, energy or overall well-being
- Glasses of water/day
- Servings of fruit/vegetables per day or week
- Fast food meals per week
- Meals per day
- Waist girth
- APFT score
- Movement to a different stage of change
- Cigarettes per day

Many of these outcomes are really interim measures of change. By measuring these small steps, participants can see progress and get valuable motivation towards the ultimate goal. In the meantime, program implementers also get valuable feedback on program effectiveness, along with the chance to identify and fix program problem spots.

At the end of a program, a more in-depth assessment can be made by calculating:

- Lost duty or training time
- Program costs
- Health care visits made
- Health care visits avoided
- Number of steps per day or week
- Attendance at health screenings or classes
- Weight or inches lost
- Changes in BMI
- Total amounts of any of the above or median/average for all program participants.

## Don't Reinvent the Wheel!



### Influenza (flu) Prevention

USACHPPM Health Information Operations has downloadable posters, a tri-fold brochure, fact sheets, and many other resources targeted to

health clinics, general areas, service members, leaders, and Soldier's quarters/barracks. <http://chppm-www.apgea.army.mil/news/Influenza%20Home%20Jul%2005.htm> (Access the posters at the USACHPPM Toolbox tab.)

## HPPI News & FAQs

### FY06 REQUEST FOR PROPOSALS



The HPPI FY06 Request for Proposals is now open. Applications will be accepted through 9 January 2006.

Individuals may submit proposals for health promotion and prevention initiatives that show potential as best approaches. Applicants in the following areas are especially encouraged to apply: spiritual well-being, STDs/HIV education; weight management for teenagers/young adults; health promotion in times of deployment; and Army National Guard and Army Reserve health promotion, wellness, and prevention. HPPI funds will only be awarded for established, ongoing health promotion initiatives.

Individuals may also apply for participation in a Spiritual Health Survey Pilot Project. This project will validate a newly-developed survey created specifically to assess spirituality and health in a military environment.

Detailed instructions for submitting a HPPI FY06 proposal are on the HPPI web page at <http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx>.